

09/26/03

17125 U.S. PTO

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

For new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No.	243236US90
First Inventor or Application Identifier	Hiromasa FUJII, et al.
Title	ADAPTIVE EQUALIZING APPARATUS AND PROGRAM THEREFOR

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification Total Sheets
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets
4. ☒ Oath or Declaration Total Pages
 - a. ☒ Newly executed (original)
 - b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation/divisional with box 17 completed)
 - i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).
5. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification or Sequence Listing on :
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

- ACCOMPANYING APPLICATION PARTS**
7. ☐ Assignment Papers (cover sheet & document(s))
 8. ☒ Application Data Sheet. See 37 CFR 1.76
 9. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
 10. ☐ English Translation Document (if applicable)
 11. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations (5)
 12. ☐ Preliminary Amendment
 13. ☒ White Advance Serial No. Postcard
 14. ☒ Certified Copy of Priority Document(s) (2)
(if foreign priority is claimed)
 15. ☐ Applicant claims small entity status.
See 37 CFR 1.27
 16. ☒ Other: Request for Priority

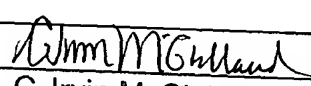
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application no.:
Prior application information: Examiner:			Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

Customer Number
22850
(703) 413-3000
FACSIMILE: (703) 413-2220

Name:	Masayasu Mori	Registration No.:	47,301
Signature:		Date:	9/26/03
Name:	C. Irvin McClelland	Registration No.:	

Registration Number 21,124

22212 U.S. PTO
10/670562

092603

Docket No. 243236US90

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Hiromasa FUJII, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: ADAPTIVE EQUALIZING APPARATUS AND PROGRAM THEREFOR

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	16 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x \$84 =	\$0.00
<input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$280.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$750.00
TOTAL OF ABOVE CALCULATIONS				\$1,030.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$1,030.00

☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.

☐ A check in the amount of _____ to cover the filing fee is enclosed.

☒ Credit card payment form is attached to cover the filing fee in the amount of **\$1,030.00**

☒ The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 9/26/03


Masayasu Mori

Registration No. 47,301

Customer Number

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)

C. Irvin McClelland
Registration Number 21,124